

LREG 01/96

HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL.: 587-0460 FAX: 587-0470

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(See back of this form for instructions)

	(Type or F	rint Clearly)			
PART I LOBBYIST					
NAME(Last)	(First) (Middle)		TELEPHONE		
MORRIS	GEORGE A. "REI			808/531-4551	
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)	
222 S. VINEYARD ST.,	STF 401	HONOLULU	HI		
30070 2100					
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) TELEPHONE					
G.A. MORRIS, INC				808/531-4551	
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)	
222 S. VINEYARD ST.,	STE. 401	HONOLULU	HI	96813-2453	
PART II ORGANIZATION					
NAME OF ORGANIZATION YOU L	OBBY FOR (Do not abbreviate)			TELEPHONE	
SECURITIES INDUSTRY	ASSOCIATION			212/720-0611	
MAILING ADDRESS (Street)	1000011112011	(City)	(State)	(Zip Code)	
1	LOOD NEW VODY NV 1007		(State)	(ZIP C008)	
120 BROADWAY, 35TH FLOOR, NEW YORK, NY 10271					
NAME OF PERSON RESPONSIBL	E FOR PREPARING ORGANIZATI	ON'S EXPENDITURES STATI	EMENT	TELEPHONE	
MELODY T. BUTAY		4		808/531-4551	
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)	
222 S. VINEYARD ST.,	STE. 401	HONOLULU	HI	96813-2453	
PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY					
	West of the second section of the section of th				
Agriculture	Education	Human Services	Science Scienc	cience, Technology & conomic Development	
Communications &	Government Operations Finance	& Intergovernmental		ourism & Recreation	
Consumer Protection &	Hawaiian Affairs	Labor & Employm	ent Tr	ansportaion	
Culture, Arts, Historic Preservation	Health	Planning, Land & \ Use Management	Water O	ther: (indicate below)	
	(Lieunian	•			
Ecology, Energy, Environmental Protection	Housing	Public Safety & Co	offections		
PART IV CERTIFICATION OF LOBBYIST					
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.					
1	(Signature of Lobbyist)	· · · · · · · · · · · · · · · · · · ·	(Date)	
PART V AUTHORIZATION	ON TO LOBBY			2001/05/2005/200	
NAME	AME TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED				
KIM CHAMBERLAIN VICE PRESIDENT & COUNSEL					
NAME OF ORGANIZATION (If app	olicable)			TELEPHONE	
SECURITIES INDUSTRY	ASSOCIATION	1		212/720-0611	
	7100002711	(City)	(State)	(Zip Code)	
MAILING ADDRESS (Street)	TIOOD NEW VODE NV 1007	• •	(3.2.2)	V F/	
120 BROADWAY, 35TH FLOOR, NEW YORK, NY 10271					
I hereby authorize the above—named person to engage in lobbying activities on behalf of the undersigned					
1/11 MIM	1.16		1/14/03		
(Signature of Au	thorizing Officer or Person Repres	ented)	/ (Date)	